

FORMAL COMPLAINT

ORIGINAL

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

Illinois Commerce Commission
527 East Capitol Avenue
Post Office Box 19280
Springfield, Illinois 62794-9280

For Commission Use Only:

Case 05-0684

Regarding a complaint

by Unicorn Oil Corporation

(Person making the complaint)

against Peoples Energy/ Peoples Gas

(Utility name)

as to Charging for over esitimated bill and gas

leak that they created when gas was shut off.

(Reason for complaint)

in Chicago

Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is P.O. Box 495916/ Chicago, Il

The service address that I am complaining about is 10115 S. Torrence Ave./Chicago, Il 60617

My home telephone number is [773] 768-0026

Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at [773] 768-0026

Peoles Energy/ Peoples Gas

(Full name of utility company)

(respondent) is a public utility and is subject to the provisions of

the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with your complaint.

83. IL, Formal Complaints 200.170

CHIEF CLERK'S OFFICE
2005 OCT 21 P 12:41
ILLINOIS COMMERCE COMMISSION

Have you contacted the Consumer Affairs Division of the Illinois Commerce Commission about this complaint? ☒ Yes ☐ No

Has your complaint filed with that office been closed?

☐ Yes ☐ No

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.

See Attached Letter

Please clearly state what you want the Commission to do in this case.

To Investigate

Date: 10/10/05
(Month, day, and year)

Complainant's signature _____

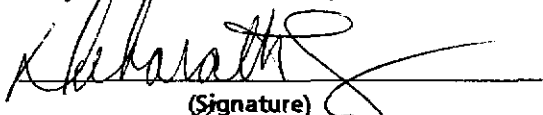
If you will be represented by an attorney, please give the attorney's name, address, and telephone number.

You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).

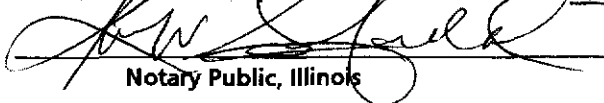
VERIFICATION

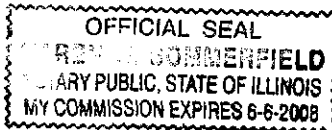
A notary public must watch you fill out this part of the form.

I, Deborah Crawley, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.


(Signature)

Subscribed and sworn/affirmed to before me this 10th day of October, 192005


Notary Public, Illinois



NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.